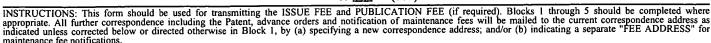


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Typed or printed name <u>Donald E. Townsend</u> Registration No. <u>22,069</u>	Typed or printed name _	Donald E. To	ownsend		_	Registrati	on No. <u>22,069</u>	

submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

K. Matsutani, et al.

Serial No.: 09/939,579

Art Unit: 3731

Filed: August 28, 2001

Examiner: D. Davis

FOR: Ophthalmologic Knife

TRANSMITTAL OF ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

BOX: ISSUE FEE

Sir:

Attached for filing in the above-captioned matter is the Issue Fee Transmittal (Form PTOL-85B), and our check in the amount of \$1,730.00 (\$1,400 for the Issue Fee, \$300 for the Publication Fee, and \$30 for the Advanced Order of ten (10) patent copies). The Commissioner is hereby authorized to charge any deficiency or credit any overpayment to Deposit Account 20-1424. A duplicate copy of this Transmittal is attached.

Respectfully submitted,

Donald E. Townsend

Reg. No. 22,069

Customer No. 27955

Date: May 9, 2005

TOWNSEND & BANTA c/o PortfolioIP P.O. Box 52050 Minneapolis, MN 55402 (202) 220-3124